

Introduce the Gender Equity in Health Premiums Act

Washington, DC - Reps. Linda Sánchez (D-CA), along with Ginny Brown-Waite (R-FL), introduced bi-partisan legislation today that would prohibit health insurance companies from engaging in "gender rating," a practice which charges women more for health insurance premiums than men. The Gender Equity in Health Premiums Act would amend the Public Health Service Act to prohibit gender rating in both the group and individual markets.

"As a woman and having been in the hospital recently for the birth of my son, I understand how expensive health care can be," said Rep. Linda Sánchez, member of the House Ways & Means Committee.

"Yet insurers in the individual and small group markets can legally discriminate -- by charging higher premiums to women simply because they are women. This blatant discrimination forces many women and their families to receive poor care or go without, and it is time to put it to an end."

"It is ludicrous that in this day and age, insurance companies can charge women more simply for being women," said Rep. Ginny Brown-Waite. "That is the definition of discrimination and it must end. As the health care reform debate rages on, this is an important fix that can make a real difference now."

"We've listed our "Top 5 Reasons Health Insurance Isn't Fair to Women," a compelling list of realities for why we need the Gender Equity in Health Premiums Act," Rep. Sánchez stated.

"This is one small step to level the playing field and make health care accessible and affordable for all - regardless of gender."

Top 5 Reasons Health Insurance Isn't Fair to Women

5. Twenty-one million women and girls went without health insurance in 2007. In addition to requiring reproductive healthcare - yearly pap smears, mammograms, and obstetric care - women are twice as likely to suffer from headaches, and more likely to experience joint, back or neck pain. Women are also four times as likely to develop osteoporosis.

4. Women are less likely to be employed full-time than men, making them less eligible for employer-based health benefits themselves. In fact, less than half of women can get health insurance through their work.

3. A survey by the National Women's Law Center found that the vast majority of individual market health insurance policies did not cover maternity care. Moreover, it is still legal in 9 states for insurers to reject applicants who are survivors of domestic violence.

2. In a recent national survey, more than half of women (52%) reported delaying or avoiding

needed care because of cost, compared with 39% of men. In addition, one-third of women were forced to make a difficult tradeoff such as using up their savings, taking on debt, or giving up basic necessities.

1. Women are often charged higher premiums than men. Holding other factors constant, a 22 year old woman can be charged one and a half times the premium of a 22 year old man.

**Statistics for this list were obtained from studies and research compiled by the United States Department of Health and Human Services.*

The Gender Equity in Health Premiums Act has been endorsed by the American College of Obstetricians and Gynecologists. "I congratulate Reps. Sánchez and Brown-Waite on this important legislation," said Gerald F. Joseph, MD, President, American College of Obstetricians and Gynecologists. "Insurers stopped charging minorities higher premiums, just because of their race, more than 40 years ago. With this legislation, health care reform will ensure fair insurance rules for women, too."